

**TOWN OF TOLLAND MASS
DOG LICENSE**

May 1, 2008 thru April 30, 2009

Date: ____/____/2008

Tag #: _____

Owner Name: _____

Dog's Name: _____

Spayed or Neutered: \$5.00

Intact: \$10.00

Fee Paid: \$_____ Cash or Check (Circle one)

Payment rec'd by: _____ Date: _____

DOG OWNER'S COPY

**TOWN OF TOLLAND MASS
DOG LICENSE**

May 1, 2008 thru April 30, 2009

Date: ____/____/2008

Tag #: _____

Owner Name: _____

Phone #: _____

Street Address: _____

**Mailing Address: _____
(if different than resident address)**

Name of Dog: _____ Breed: _____

Color: _____ Age: _____ Weight: _____ Sex: _____

Rabies Exp. Date: Date: ____/____/____

***COPY OF RABIES REQUIRED**

Spayed or Neutered: \$5.00

Intact: \$10.00

(Proof of Spaying or Neutering required)

Fee Paid: \$_____ Cash/Chk

Rec'd by: _____ Date: ____/____/2008

BOTTOM HALF - FOR TOWN CLERK'S RECORDS